

my husband's job, I could end up like my sister. He's been at his company for less than a year now, and I pray he doesn't lose his job or his coverage. So as you see, Congressman ETHERIDGE, health care reform is a deeply personal issue for me, and it is one that I hope will finally be resolved this year. It's too late for my sister, but I'm hoping this gets done soon, especially before her daughter gets out on her own. I don't want her ever to have to deal with what her mother and I are dealing with under this ghastly system.

And a nurse from Sanford, North Carolina, recently wrote me in favor of health reform, and she said, Insurance premiums are too high. How can we wrestle the high cost of health insurance from the companies? When they tell a physician how much he can charge for a procedure or what medications he can prescribe, we are allowing untrained, uneducated individuals to dictate health care to our system in this country.

And a woman in Louisburg, North Carolina, says, Please vote "yes" on health care reform. I have a very successful new business that my son would like to join me in, but he can't afford to leave his current employer's health plan because he has a child with autism. No private plan will provide coverage for him, even though he has never filed a claim for his treatment of autism. We are not looking for a hand-out, just a fair playing field. Everyone should be able to get insurance.

And a young man from Raleigh wrote and said, I want to thank you very much for the work you have been doing in my district and urge you to vote for the health care reform bill. Despite the misinformation and outright lies that are being spread about the bill, I hope the House acts to pass comprehensive reform to our broken system.

My girlfriend, whom I love very much, has a disease which prevents her from getting coverage. In fact, the insurance company dropped her when they found out she had it. This disease will very possibly lead to her death. While it is too late for this bill to help her, I do not want any other American to have to worry about how they will get treatment for any disease that they may have. I urge you to vote for the bill.

Another woman from Clayton, North Carolina, tells me she has a brain tumor, and as of December of this past year, the insurance company dropped her coverage. She is talking now to an attorney and plans to file bankruptcy. And this is a tragedy. These are examples of why we need reform.

Mr. Speaker, I'm listening to North Carolinians from all perspectives and a wide range of points of view about this system. We need reform that cuts costs, assures quality of care, patient choice and prohibits denials for pre-existing conditions.

The SPEAKER pro tempore. Under a previous order of the House, the gen-

tleman from North Carolina (Mr. JONES) is recognized for 5 minutes.

(Mr. JONES addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

HEALTH CARE REFORM

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Kansas (Mr. MORAN) is recognized for 5 minutes.

Mr. MORAN of Kansas. In order to achieve real health care reform, the kind of change that would relieve Kansas families and business owners from facing drastic increases in their health insurance premium costs, we must do something to reduce health care costs. If we fail to affect cost, then reform efforts, whatever they may be, will fail because costs simply get shifted and always roll downhill to the patient. This is one of the many reasons I'm so adamantly opposed to the Democrat health care plan.

You may hear that the health care legislation we apparently are going to vote on this week will reduce costs. But the accounting data shows just the opposite. The facts are the facts. Democrats count billions in tax revenues to pay for their plan's new programs, but then they assign those same revenues to preserve Medicare and Social Security. They are double counting. When all the budgetary gimmicks are removed, we see this bill for what it is, a trillion dollar budget breaker that we cannot afford and that won't improve everyday Americans' access to affordable health care. It's the worst of both worlds: Breaking the bank, breaking the Treasury and not controlling health care costs.

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. WOOLSEY) is recognized for 5 minutes.

(Ms. WOOLSEY addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

HEALTH CARE REFORM

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Mrs. CAPPS) is recognized for 5 minutes.

Mrs. CAPPS. Mr. Speaker, I rise on behalf of America's women to urge passage of health care reform to benefit our mothers, our sisters, our daughters, our families, and our friends. And, of course, when we pass health care reform, we will improve health care for all Americans.

But today I would like to concentrate on why women stand to gain the most. Right now, being a woman is reason enough for insurance companies to discriminate against us. Today, women are being charged higher insurance premiums than men simply for being a woman.

Our legislation will put an end to this practice by prohibiting a practice

known as gender rating whereby women are automatically charged higher rates. Right now, there are women who have been victims of domestic violence who are denied health insurance coverage because insurance companies have said that domestic violence is a preexisting condition. Our legislation will put an end to this practice and expressly prohibit insurance companies from considering domestic violence a preexisting condition.

Right now, many women can only obtain an insurance policy that excludes maternity coverage. Our legislation will put an end to this practice by requiring coverage for maternity care. These three provisions alone will help millions of women in this country.

Mr. Speaker, as a public health nurse, I'm particularly enthusiastic about provisions in the bill to eliminate cost sharing for some of the most important preventive services that women should be accessing. And, of course, this provision is important for men as well. But many of us, especially Members of Congress who already have comprehensive health insurance, take it for granted that we are going to get routine checkups. There are, however, too many women who forgo screenings for conditions like cervical cancer or heart disease because they can't afford these screenings, either because they are uninsured or their insurance company requires prohibitive copays for routine screening.

The legislation we will soon pass will ensure that there is no cost for patients to be accessing the most important screenings which are recommended by medical experts. Those of us in the public health community have long been advocating this because costs should never stand in the way of lifesaving screening procedures.

In addition to the ways our legislation will benefit individual women, it's important to keep in mind that women are often the health care decision-makers for their households. And that's why we all have reason to be so hopeful about how our bill will improve health care for families as a whole. Insurance premiums for families have risen at alarming rates over the past decade and will continue to rise if we don't enact health reform now.

Middle class families especially have shouldered this burden as the rise in premiums has far outpaced any rise in wages. The announcement, for example, by Anthem in California that it will raise premiums by up to 40 percent is just one of the latest outrages. When premiums become too expensive to pay, families are forced to drop coverage. And then what happens when someone in the family gets sick? They are forced to spend down all their assets until eventually bankruptcy may become their only option.

Mr. Speaker, over half of all bankruptcies in the United States today are caused by medical debt. And in 2008, over 900 families in my congressional district alone were forced into bankruptcy because of medical debt. And